Application or Docket Number

Effective December 8, 2004									10/595/70			
		CLAIMS		D - PART I		(Column 2)		SMALL ENT	TITY	OR	OTHER SMALL E	
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
BASIC FEE								BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE								EXAM. FEE	100		EXAM. FEE	
SEARCH FEE								SEARCH FEE	50		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			8	g minus 20 = *				X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			2 minus 3 = *					X \$ 100 =		OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRE			ESENT				1	+ \$ 180 =		OR	+ \$ 360 =	
* If	the difference	in column 1 is	less than a	zero, enter "C)" in cc	olumn 2	. .	TOTAL	300	OR	TOTAL	
AMENDMENT A	Total	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus	(Colur HIGH NUMI PREVIC PAID	EST BER DUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
	Independent	*		***		<u> - </u>	1	X \$ 25 =		OR	X \$ 50 =	
			Minus			=	$\left\{ \ \ \right $	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT								FFF	ADDI-	OR	FFF	ADDI-
AMENDMENT B		AFTER AMENDMENT		PREVIO PAID I	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		11		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR	+ \$ 360 =		
							•	TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
* **	If the "Highest Nu If the "Highest Nu	umn 1 is less than th umber Previously Pa umber Previously Pa mber Previously Pai	aid For" IN TH aid For" IN TH	IS SPACE is less IS SPACE is less	s than '20 s than '3'	0', enter "20". ', enter "3".	d in th	e appropriate hov	cin column	1		